

# 2016 Dental Plan Rates

## 100% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Dental Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
State Dental Plan (Delta)	29.70	24.70	5.00	58.14	29.08	29.06	87.84	53.78	34.06
HealthPartners State of MN Dental Plan	29.70	24.70	5.00	58.14	29.08	29.06	87.84	53.78	34.06

## 75% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Dental Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
State Dental Plan (Delta)	29.70	18.54	11.16	58.14	21.82	36.32	87.84	40.36	47.48
HealthPartners State of MN Dental Plan	29.70	18.54	11.16	58.14	21.82	36.32	87.84	40.36	47.48

## 50% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Dental Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
State Dental Plan (Delta)	29.70	12.36	17.34	58.14	14.54	43.60	87.84	26.90	60.94
HealthPartners State of MN Dental Plan	29.70	12.36	17.34	58.14	14.54	43.60	87.84	26.90	60.94

## 0.00% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Dental Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
State Dental Plan (Delta)	29.70	0	29.70	58.14	0	58.14	87.84	0	87.84
HealthPartners State of MN Dental Plan	29.70	0	29.70	58.14	0	58.14	87.84	0	87.84